

MARYLAND DEPARTMENT OF HEALTH

OVERVIEW OF MARYLAND'S CRISIS SERVICE SYSTEM

Behavioral Health Administration

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Health Administration (BHA)

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Our Mission and Vision

VISION

Improved health, wellness, and quality of life for individuals across the life span through a seamless and integrated behavioral health system of care.

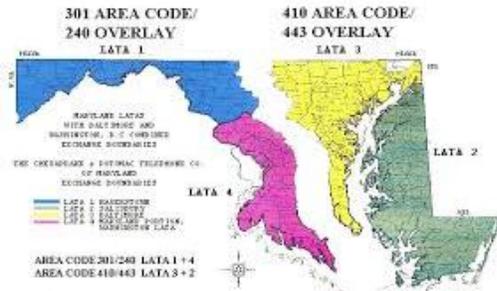
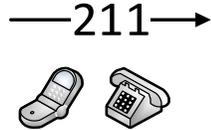
MISSION

*The BHA will, through publicly-funded services and support, **promote recovery, resiliency, health and wellness** for individuals who have or are at risk of **emotional, substance related, addictive and/or psychiatric disorders** to improve their ability to function effectively in their communities.*

Array of Crisis Services



Crisis Hotline (MD Crisis Connect)



Western 866-411-6803

Eastern 866-231-7101

Central 3 866-406-8156

Southern 866-770-1910

1 - Crisis
2- General 211

1 - Crisis
2- General 211

1 - Balt City
2- Other

1 - Crisis
2- General 211

1 - Crisis
2- General 211

LATA 1

301-695-5683



301-663-1048

LATA 2

410-749-5496



410-749-6060

LATA 3

Press 1 410 539-0039



Press 2 410-531-6677



maps to 410 895 1596 - Sub Menu



LATA 4

301-864-7153



301-864-7161

Suicide Prevention

To increase awareness of suicide; improve preparedness to identify individuals at-risk, intervene, and provide support to promote healing; and improve quality of life through a variety of collaborations with Federal and State partners, community agencies, providers, and consumers

- ***MD Suicide Prevention Intervention Network (MD-SPIN)***
- Provides a continuum of suicide prevention training, resources, and technical assistance to advance the development of a comprehensive suicide prevention and early intervention service system for youth and young adults. Goals are to increase the number of youth, 10-24, identified, referred and receiving quality behavioral health services in target settings (schools, colleges/universities, juvenile services facilities, primary care, emergency departments)
- Operated out of the Division of Child and Adolescent Psychiatry (DCAP) at University of Maryland, Baltimore (UMB) along with two Johns Hopkins Bloomberg School of Public Health (JHU) teams (an evaluation team and a screening/training team focused on suicide prevention screening efforts in EDs and inpatient units)
- **Funded** by a five year \$3,675,000 **SAMHSA grant** to end 9/30/19

Governor's Commission for Suicide Prevention

- The commission was established via executive order in 2009 and is responsible for developing the state suicide prevention plan and submitting a biennial report to the governor

Annual Suicide Prevention Conference

- Annual conference coordinated by BHA to raise awareness about suicide and provide interactive, educational workshops and connection to community resources for a vast audience including behavioral health professionals, survivors of suicide, educators, CSAs, and students

Suicide Prevention

MD Crisis Connect <https://www.mdcrisisconnect.org>

The Maryland Crisis Hotline- renamed **MD Crisis Connect** to reflect crisis access through the website, text/chat, and a hotline

Call specialists:

- Answer calls 24/7/365, chat and text services are available.
- Follow up with callers in crisis, connect callers to emergency response system when indicated
- Screen for risk of overdose, suicidal ideation, homicidal ideation, provide information & referral for behavioral health assessment and treatment
- **April 1, 2018**, 2-1-1 Maryland became the service provider for MD Crisis Connect, merging crisis hotline services into the 211 statewide information and referral call system established in 2000
 - Callers that dial 211 are prompted to “To speak to a call specialist about a mental health or substance use crisis or problem, Press 1”
 - Pressing 1 will route the caller to one of five crisis call centers accredited through the American Association of Suicidology. Local lines meeting specific criteria will be consider for inclusion in the network in the future

MORR Crisis Beds/Crisis Stabilization Center

- **Crisis beds/SRD:** Crisis services that are embedded within 3.7 residential facilities and provide short term (not usually to exceed 4 days) stabilization services, enhance already existing withdrawal management services, and expand access to treatment and recovery service availability with addition of buprenorphine induction and Care Coordination by Certified Peer Recovery Specialist.
- **Crisis Stabilization Center (Baltimore City):** The Maryland Crisis Stabilization Center offers a safe place for individuals who are under the influence of drugs and/or alcohol (“under the influence”) to sober and receive short-term interventions, such as buprenorphine induction and medical screening and monitoring. Individuals will also be offered the opportunity to connect with ongoing behavioral health treatment, peer and recovery support services, and case management assistance."

Maryland Opioid Rapid Response (MORR) Expansion

- **Expanded ASAM Level 3.1 Treatment beds** - A total of 98 beds proposed. Currently **64 beds are online**. Funding was awarded to five jurisdictions. Ten providers received funding. One hundred fifty-nine individuals (159) served as April 30, 2018.
- **Expanded crisis beds** co-located within ASAM Level 3.7 or another setting – Eighty-three (83) bed capacity. **Currently 63 beds are online**. Funding was awarded to four jurisdictions. Six providers awarded funding. **Five hundred ninety-four (594) individual served** as of April 30, 2018.
- **Established Buprenorphine consultation service “warm line”** to educate and support health care prescribers with guidance on the induction and maintenance of buprenorphine. This service began October 16, 2017.

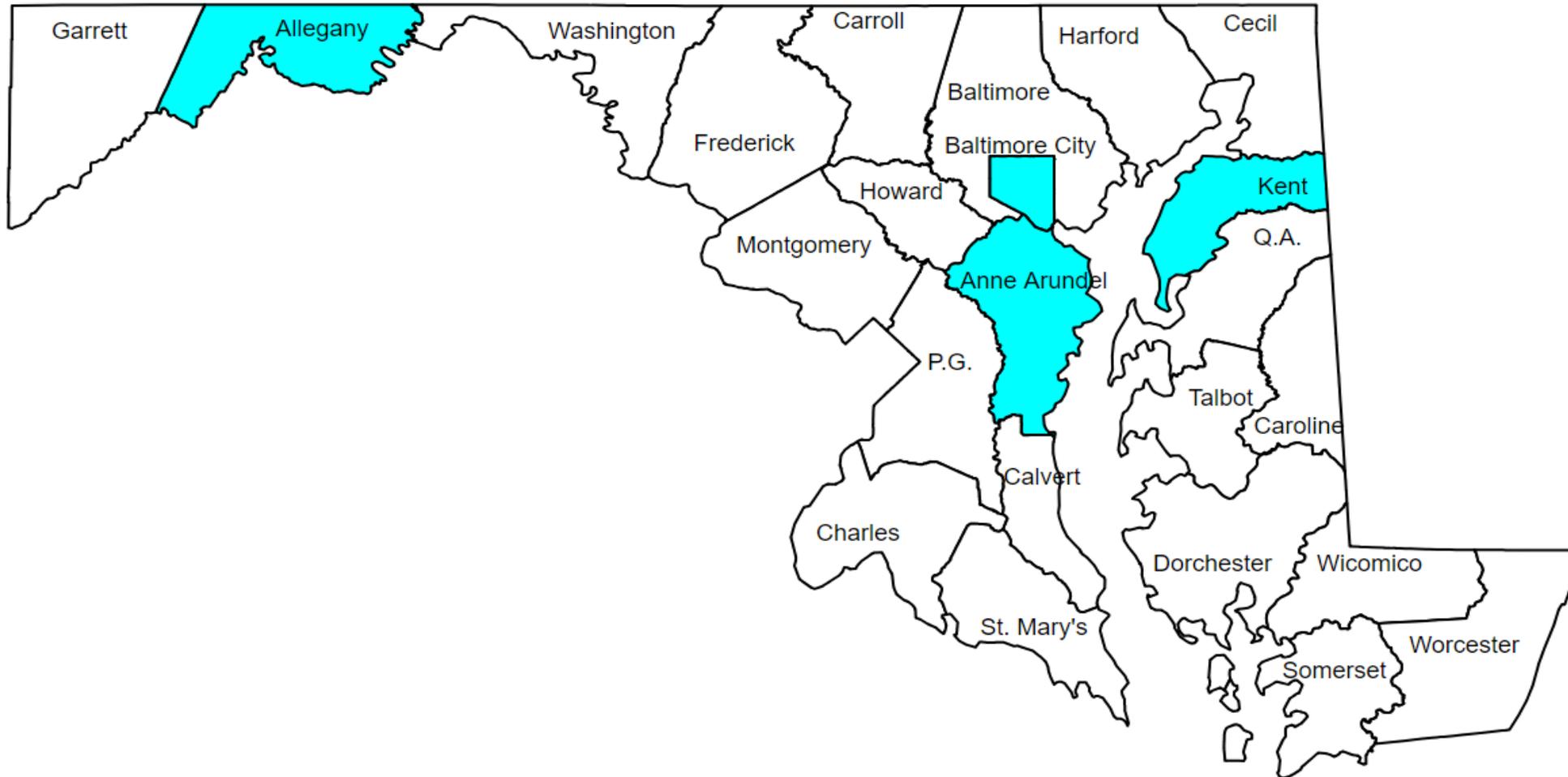
website: www.marylandMACS.org

Learning and Innovation: Crisis Stabilization Center

- Crisis Stabilization Center opened at Tuerk House April 2, 2018 under contract to Baltimore Health Systems Baltimore. Fifty-five persons served.
- Operated 24/7
- Persons intoxicated with alcohol or drugs are diverted from emergency rooms to the facility by EMS or Baltimore Crisis Response, Inc.
- Services:
 - The intoxicated persons receive a biopsychosocial medical assessment and vital signs are monitored
 - Individuals are provided a place to sober, shower
 - Patients are engaged by nurses and peer recovery specialists and will connect them to treatment
 - A discharge plan is formulated



MORR Crisis Beds/Crisis Stabilization Center



P.G. = Prince George's; Q.A. = Queen Anne's

Walk-In Centers

Walk-In Crisis Center:

- Walk-in centers are intended to serve anyone in need of immediate assistance at any time and meet with a counselor.
- Counseling and Short term follow-up is offered until an appropriate referral is set.
- Walk-in counseling is geared towards the person or family in need of immediate support or crisis intervention services for a mental health, personal, situational or family crisis.

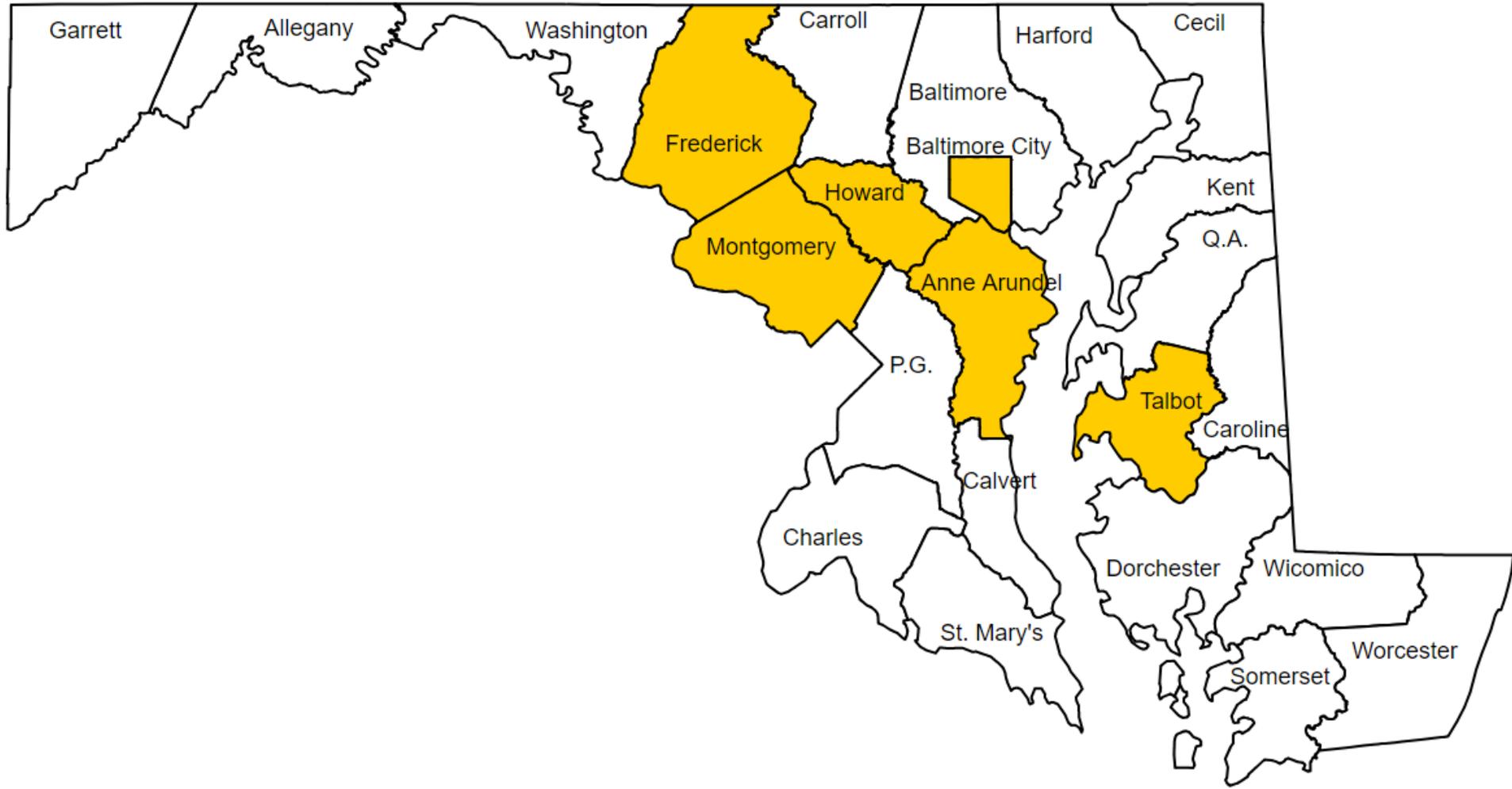
Walk-in Crisis Centers:

- Gaudenzia (24/7) is a residential treatment center in Baltimore City focusing on SRD;
- Grassroots (24/7) is a multi-service crisis intervention center in Howard County addressing mental health crisis;
- Mental Health Association of Frederick County (M-F, 12 pm – 8 pm, Weekends, 12 pm – 4 pm) addressing mental health crisis;
- Department of Health and Human Services in Montgomery County (24/7) providing psychiatric and situational assessment and treatment referral.

Safe Stations

- **Safe Stations:**
- Safe Stations program uses fire and police stations as access hubs for entry into the treatment system 24 hours a day, seven days per week
- Safe Stations program includes care coordination, peer recovery support, and legal assistance with warrant resolution. Anne Arundel County is the leading example of safe stations with one in each of its 35 stations. Talbot County recently implemented two safe stations in March of 2018.

Walk-In Centers/Safe Stations

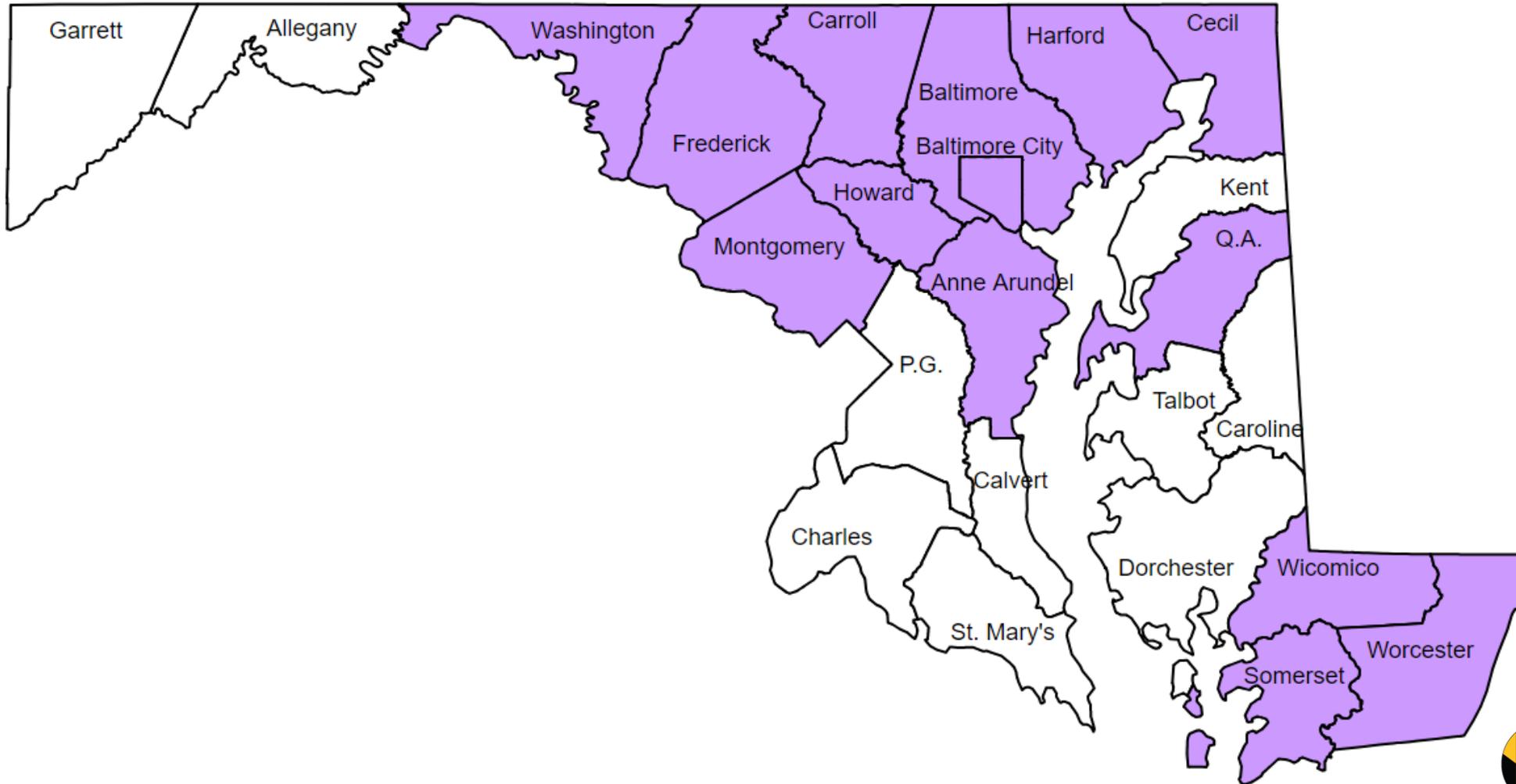


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Mobile Crisis Teams

- MCT is defined as community-based mobile crisis services that provide 24/7 availability of face-to-face professional and peer intervention, deployed in real time to the location of a person in crisis, whether at home or wherever the crisis may be occurring, to begin the process of assessment and definitive treatment outside of a hospital or health care facility.
- There are 13 MCT programs spread across the state with another one in Carroll County that has just secured funding. One program serves five counties and another one serves two counties, both in rural areas. Those areas of the state that are without MCT are the west and south and are primarily rural.

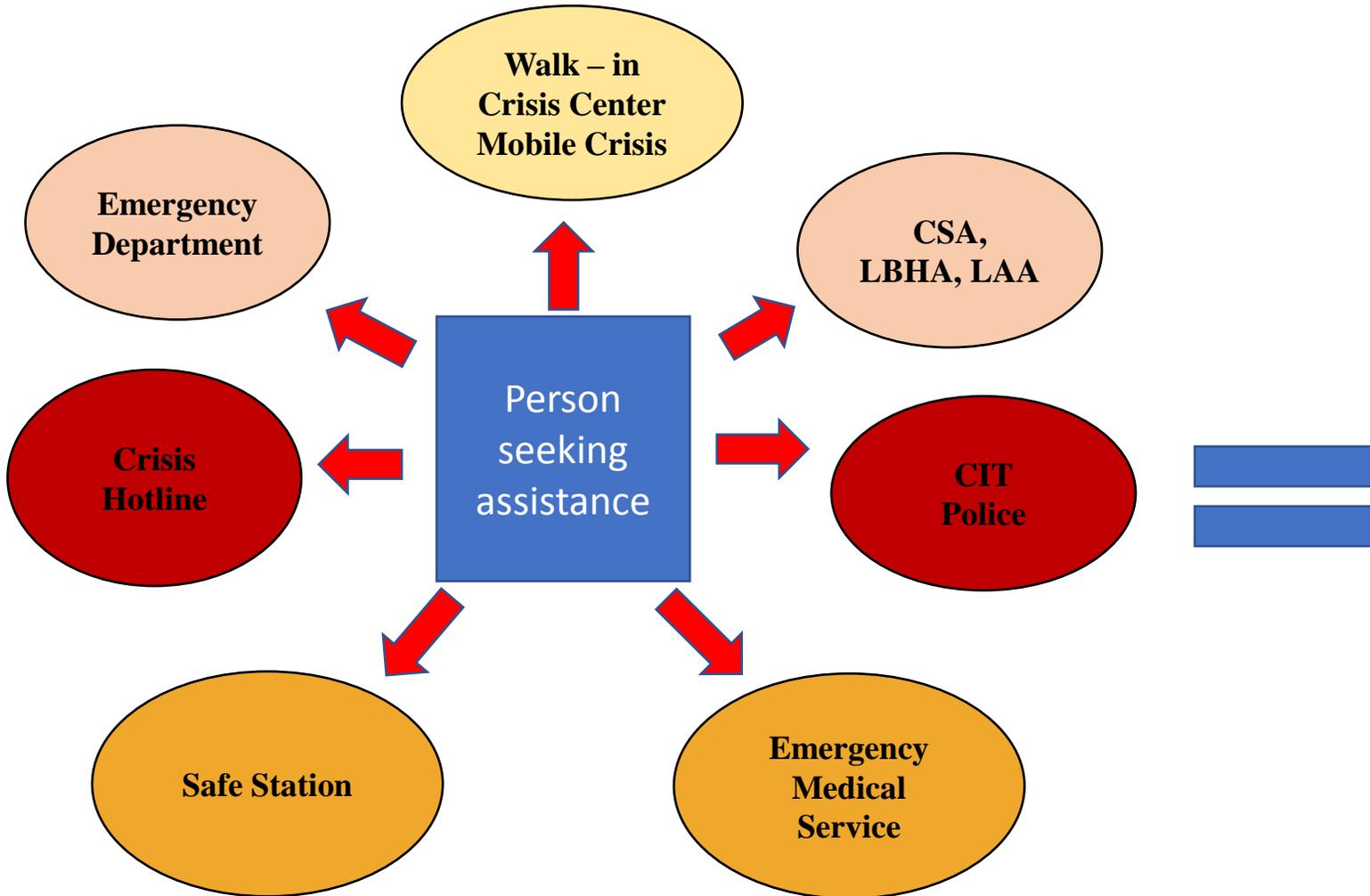
Mobile Crisis Teams



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Crisis Services Access Points

Service Options



- Crisis Bed
- Mobile Crisis Team Intervention
- Maryland Crisis Stabilization Center
- Outpatient Treatment
- Residential Treatment
- Inpatient Hospitalization

Comprehensive Crisis Response Center (CCRC)

- Planning Workgroup established, met 6 times to develop a 24/7, 365 days/year Comprehensive Crisis Center for individuals who have behavioral health needs (mental health and substance use).
- CCRC will be the hub to divert individuals from preventable emergency room and inpatient admissions.
- Services will include: assessments, on-site crisis stabilization in a non-emergency department setting, linkages to services, outreach, and peer recovery support services. Services can be walk-in voluntary or emergency petition.
- Eligibility: 18 years of age; mental health, substance use or co-occurring disorders; and medically cleared.
- Target date: July 2019

Behavioral Health Crisis Response Grant Program

HB 1092 requirements:

- a) Establish a Behavioral Health Crisis Response Grant Program,
- b) Define the purpose of the program,
- c) Administer the program,
- d) Award grants to local behavioral health authorities to establish new systems or expand current systems

Program services requirements:

- a) Serve local behavioral health needs for children, adults, and older adults in crisis
- b) Align with national standards
- c) Integrate mental health and substance related disorders treatment
- d) Coordinate care upon discharge and provide seamless aftercare

Services in focus:

- a) Mobile Crisis Teams
- b) On-Demand Walk-in services
- c) Crisis Residential Beds

Questions?